## UTILITY PATENT APPLICATION TRANSMITTAL

r new nonprovisional applications under 37 C.F.R. 1.53(b).

Attorney Docket No.			Es do	0602
	First Named Inventor or	Application Id	lentifier	Toru Nakada et al.
	Title			DE INFORMATION PARATUS AND RELATED
		PROGRA	M GUII	DE INFORMATION RANSMITTING SYSTEM

i i i i i i i i i i i i i i i i i i i						
		<del></del>		Assistant Comm	isioner for Pate Ata	
APPLICATION	ELEMENTS		ADDRESS TO			
1.  Selling fee as calculated below 2.  Specification	[Total Page rth below] vention ted Applications I sponsored R & D Appendix tion ention trawings (if filed)  e [Total Page [Total Page] and or copy) ation (37 CFR 1.63(c)	s [12]] jes [2])  8. 9. 10.	Nucleotide and Submission (iii a. Compub. Paper c. Staten copies	ion Document (if ap)	ocument(s))	
DELETION OF INVE	entor(s)  at attached deleting in the properties of the prior application, see 37 and 33(b)  are able if Box 4b is the prior application is supplied to find the disclosure of	nventor(s)  CFR  14.  15.  tion, from under Box the	Statement (IDS Preliminary Ame Return Receipt (Should be specified Statement(s) Certified copy of	S)/PTO-1449 C	itations 3) n prior application, er and desired	
17. If a CONTINUING APPLICATION,	check appropriate bo	ox and supply the req	uisite information:			
☐ Continuation ☐ Divis		nuation-in-part (CIP) (	of prior application No	0		
	18.	CORRESPONDENC	L ADDILOG			
☐ Customer Number or Bar Code Label  (Insert Customer No label here)			or □ correspondence address below			
NAME			ande Sande & An	nernick, R.L.L.P.		
	Suite 800					
ADDRESS	1990 M Street, N.W.					
			,			
CITY	Washington	STATE	DC	ZIP CODE	20036-3425	
COUNTRY	U.S.A	TELEPHONE	(202) 331-7111	FAX	(202) 293-6229	

Express Mail Label No.

Fee Calculation and Transmittal

			ree Calculation					
(Col 1)	] Γ	(Col 2)	(Col 3)	SMA	LL ENTITY		NON-S	MALL ENTITY
NO. FILED			NO. EXTRA	RATE	FEE	OR	RATE	FEE
18	minus	20	= 0	x9=	\$		x18=	\$0
8	minus	3	= 5	x39=	\$		x78=	\$390
_ First Presentation, Multiple Dependent Claims					\$		+260=	\$0
Base Filing Fee								\$690
Other Fee (specify purpose)					\$			\$40
OTAL FILING FEE* (accounting for possible small entity status)				\$	OR	TOTAL	\$1,120	
	NO. FILED  18  8  First Presentation  actify purpose)	NO. FILED  18 minus  8 minus  First Presentation, Multiple  Base ocify purpose)	NO. FILED  18 minus 20  8 minus 3  First Presentation, Multiple Dependent of Base Filing Fee excify purpose)	NO. FILED  NO. EXTRA  18 minus 20 = 0  8 minus 3 = 5  First Presentation, Multiple Dependent Claims  Base Filing Fee  scify purpose)	NO. FILED  NO. EXTRA  18 minus 20 = 0	NO. FILED         NO. EXTRA         RATE         FEE           18 minus         20 = 0         x9=         \$           8 minus         3 = 5         x39=         \$           First Presentation, Multiple Dependent Claims         +130=         \$           Base Filing Fee         \$345           ccify purpose)         \$	NO. FILED         NO. EXTRA         RATE         FEE         OR           18         minus         20         = 0         x9=         \$           8         minus         3         = 5         x39=         \$           First Presentation, Multiple Dependent Claims         +130=         \$           Base Filing Fee         \$345           ccify purpose)         \$	NO. FILED         NO. EXTRA         RATE         FEE         OR         RATE           18         minus         20         = 0         x9=         \$         x18=           8         minus         3         = 5         x39=         \$         x78=           First Presentation, Multiple Dependent Claims         +130=         \$         +260=           Base Filing Fee         \$345         \$           cify purpose)         \$         \$

X	A check in the am	nount of \$ 1,120.00 to cover the filing fee is enclosed	
	No payment is en	closed at this time. Full payment will be made when the executed Declaration is submitted.	
X		er is hereby authorized to charge and credit Deposit Account No. 22-0185 as described below. this sheet is enclosed.	Α
		Charge the amount of \$ as filing fee	
	$\boxtimes$	Credit any overpayment.	
	$\boxtimes$	Charge any additional filing fees required under 37 CFR § 1.16	
	$\boxtimes$	Charge any additional filing fees required under 37 CFR § 1.17	
	$\boxtimes$	If filing fee is not enclosed herewith, the filing fee(s) required to Deposit Account No. 22-0185.	

Name (Print/Type)	Morris Liss Registra	ition No. (Attorney/Agent)	24,510
Signature /	Jorn Jus	Date	2/24/00